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Deposit Account Statement

Requested Statement Month: April 2009  
Deposit Account Number: 080380  
Name: HAMILTON BROOK SMITH & REYNOLDS  
Attention: LAURIE COHEN  
Street Address 1: 530 VIRGINIA ROAD  
Street Address 2: P.O. BOX 9133  
City: CONCORD  
State: MA  
Zip: 01742-9133  
Country: UNITED STATES

DATE SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
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04/30	1	10813695	2376.2170-013	1814	\$140.00	\$52,996.24
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REDACTED

04/30 2	10813695	2376.2170-013	1814	\$140.00	\$49,210.24
	START BALANCE	SUM OF CHARGES	SUM OF REPLENISH BALANCE		

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